

PART B - FEE(S) TRANSMITTAL

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7590 10/20/2005

Lisa A. Haile, J.D., Ph.D.
 GRAY CARY WARE & FREIDENRICH LLP
 Suite 1100
 4365 Executive Drive
 San Diego, CA 92121-2133

01/18/2006 SFELEKE2 00000005 10677982

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Aldon Griffis	(Depositor's name)
<i>Aldon Griffis</i>	(Signature)
January 13, 2006	(Date)

01 FC:2501 700.00 OP
 02 FC:1504 300.00 OP
 03 FC:8000 50.00 OP

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/677,982	10/01/2003	Philip A. Beachy	JHU1510-2	9078

TITLE OF INVENTION: MODULATION OF HEDGEHOG-MEDIATED SIGNALING PATHWAY

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	01/20/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
MCKELVEY, TERRY ALAN	1636	435-015000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
☒ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list
 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

DLA PIPER RUDNICK
 1 GRAY CARY US LLP
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 3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

The Johns Hopkins University School of Medicine
 Baylor College of Medicine

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Baltimore, Maryland
 Houston, Texas

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☐ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
☒ Publication Fee (No small entity discount permitted)
☒ Advance Order - # of Copies Ten (10)

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- ☒ A check in the amount of the fee(s) is enclosed. \$1,030.00
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☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 07-1896 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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Authorized Signature

*Lisa A. Haile*Date January 13, 2006Typed or printed name Lisa A. Haile, J.D., Ph.D.Registration No. 38,347

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